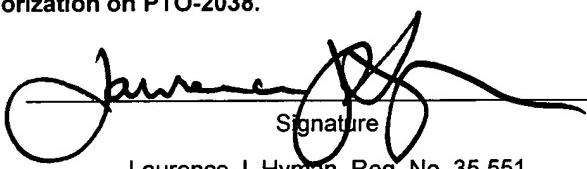




PTO/SB/22 (08-03)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 023070-113800US															
<table border="1"> <tr><td colspan="2">In re Application of HAMMOCK; ZUREK; ZHENG; NEWMAN; and GEE</td></tr> <tr><td>Application Number 09/867,963</td><td>Filed May 29, 2001</td></tr> <tr><td colspan="2">For DIHYDROXY UNSATURATED FATTY ACID LEVELS AS DIAGNOSTIC MARKERS</td></tr> <tr><td>Art Unit 1651</td><td>Examiner Gitomer, Ralph</td></tr> </table>			In re Application of HAMMOCK; ZUREK; ZHENG; NEWMAN; and GEE		Application Number 09/867,963	Filed May 29, 2001	For DIHYDROXY UNSATURATED FATTY ACID LEVELS AS DIAGNOSTIC MARKERS		Art Unit 1651	Examiner Gitomer, Ralph							
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr><td><input type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$950</td></tr> <tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr> </table> <p> <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 475 . </p> <p> <input type="checkbox"/> A check in the amount of the fee is enclosed. </p> <p> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. </p> <p> <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. </p> <p> <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. </p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). </p> <p> <input checked="" type="checkbox"/> attorney or agent of record.. Registration Number 35,551 </p> <p> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). </p> <p>Registration number if acting under 37 CFR 1.34(a). _____ .</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>12/4/03</u> Date</p> <p> Signature</p> <p>Laurence J. Hyman, Reg. No. 35,551 Typed or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. <input type="checkbox"/> *Total of _____ forms are submitted.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$	<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$950	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$															
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<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$															

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